

Level of Care Determination (LOCD)

101

2023



“Working to protect, preserve and promote the health and safety of the people of Michigan by listening, communicating and educating our providers, in order to effectively resolve issues and enable providers to find solutions within our industry. We are committed to establishing customer trust and value by providing a quality experience the first time, every time.”

-Provider Relations

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LOCD Overview & Policy

- www.Michigan.gov/MedicaidProviders
- [Michigan Medicaid Nursing Facility Level of Care Determination Website](#)
- The functional criteria includes seven domains of need called Doors. Reference the [Michigan Medicaid Provider Manual](#) >> Chapter Nursing Facility Level of Care Determination >> Section 4 - Nursing Facility Level of Care Determination Criteria for a description of each Door.
- [MIBridges Website](#)

- The Michigan Department of Health and Human Services (MDHHS) is required to assess all individuals seeking Medicaid-funded long-term services and supports (LTSS) through a Nursing Facility, the MI Choice Waiver Program, the Program of All-Inclusive Care for the Elderly (PACE), and the MI Health Link Home and Community Based Services (HCBS) Waiver Program.
- For services in these facilities or programs to be reimbursed the individual must meet Medicaid Financial, Program, and Functional eligibility.
 - **Financial Criteria:** Determined by the Local County MDHHS Office
 - **Programs Criteria:** To be enrolled into a program individuals must meet program specific eligibility requirements for [Nursing Facilities](#), [MI Choice Waiver Program](#), [PACE](#), and the [MI Health Link](#) HCBS Waiver Program.
 - **Functional Criteria** - The tool used to assess functional eligibility for individuals seeking long-term care services in the specified programs is called the Level of Care Determination tool, better known as the LOCD tool. This is a face-to-face assessment that is then entered into CHAMPS.
 - The LOCD tool may be accessed online in the Community Health Automated Medicaid Processing System (CHAMPS) through the [MILogin application](#).

LOCD Overview & Policy

- [LOCD Form](#) for face-to-face assessment
- [LOCD Field Definition Guidelines](#)
- [Michigan Medicaid Provider Manual](#) >> Chapter Nursing Facility Level of Care Determination >> Section 3.2 – Persons Authorized to Conduct the LOCD

- The LOCD is a “point in time” face-to-face assessment that determines an individual’s functional eligibility at the time of the assessment.
 - Look-Back Period versus Observation Period
- The face-to-face LOCD assessment is to be completed by the Nursing Facility, MI Choice, PACE, or the MI Health Link HCBS provider prior to or on the day of admission or enrollment into a program.
- The LOCD assessment is required to be completed by a qualified and licensed health professional:

Physician	Registered Nurse
Licensed Practical Nurse	Physician’s Assistant
Nurse Practitioner	Licensed Psychologist
Physical Therapist	Respiratory Therapist
Occupational Therapist	Speech Therapist
Licensed Social Worker (Limited License Bachelor of Social Work, Limited License Master Social Work, Licensed Bachelor Social Work, or Licensed Master Social Work)	

LOCD Overview & Policy

- [Registering for MILogin Account for Access to CHAMPS](#)
- [CHAMPS Overview](#)
- [Michigan Medicaid Provider Manual](#) >> Nursing Facility LOCD >> Section 3.3 Initial LOCD Assessment
- Reference Section 4 – Nursing Facility Level of Care Determination Criteria for the seven domains of need (i.e., Doors).

- All LOCD face-to-face assessments conducted, including Door 0 (zero, not eligible), must be entered online in CHAMPS within 14 calendar days of the face-to-face LOCD assessment (i.e., [conducted dated](#)) in order to ensure a [compliant LOCD record](#).
- A provider may conduct LOCDs for individuals without Medicaid eligibility and enter the LOCD in CHAMPS before Medicaid eligibility is established.
- Providers are responsible for reassessing LOCD eligibility prior to the End Date of the current LOCD record or when there is a significant change in condition.

LOCD Overview & Policy

- [MI Medicaid Provider Manual](#)
>> Chapter Nursing Facility
Level of Care Determination
>> Section 3.1 – LOCD
Assessment Requirement for
Reimbursement

- An LOCD is considered payable when all the following conditions are met:
 - the individual meets LOCD criteria;
 - the LOCD face-to-face assessment is entered online in CHAMPS;
 - the LOCD record is active on the date of service (meaning the date of service is on or after the LOCD Start Date and before the LOCD End Date); and
 - Example of non-payable services - assessment was completed 10/01/2022; however, the record has a start date of 11/18/2022 because LOCD was entered into CHAMPS outside the 14-calendar day rule. Therefore, services provided prior to 11/18/2022 are not payable.
 - the individual is receiving LTSS and meets all program-specific eligibility criteria. (i.e., NF, MI Choice, PACE, or the MI Health Link HCBS)

LOCD Overview & Policy

- If the LOCD is **not** entered into CHAMPS within 14 calendar days, the assessment is considered non-compliant.
- Compliant LOCD** = LOCD face-to-face assessment was entered into CHAMPS within 14 calendar days and the LOCD record **start date** will be the **conducted date** entered into CHAMPS.
- Non-compliant** = LOCD face-to-face assessment was NOT entered into CHAMPS within 14 calendar days and the LOCD record **start date** will be the **created date** (i.e., the date the LOCD was entered into CHAMPS)
- Example, face-to-face assessment was completed **10/01/2022**; however, the LOCD was not completed in CHAMPS until **11/18/2022**. Therefore, the LOCD record will start on **11/18/2022** (i.e., the assessment date is outside the 14-calendar day rule).

Compliant versus Non-compliant LOCD Record

*Provider Conducting LOCD:

*Phone (Licensed Professional):

*Name (Licensed Professional who Conducted Assessment):

*License Type (Licensed Professional who Conducted Assessment):

*Conducted Date:

10/01/2022

*Created Date:

11/18/2022

*Type of Provider Conducting LOCD:

NURSING FACILITY

*LOCD Method:

Face To Face Review

Filter By

Filter By

And

Active

Go

Go

Page Count

Save to Excel

Viewing Page: 1

LOCD Overview & Policy

- [MI Medicaid Provider Manual](#)
 - >> Chapter Nursing Facility Level of Care Determination
 - >> Section 3.4 – Adoption of an Existing LOCD by Another Provider

Adoption of an LOCD

- The LOCD is now associated to the individual, if that individual seeks admission to or enrollment in a program and has a current LOCD in CHAMPS that matches the new provider's assessment, that provider may adopt that LOCD.
 - The provider is also adopting the end date of the LOCD record.
 - A Door 0 (ineligible) record cannot be adopted.
- When adopting an LOCD the adopting provider must print out the CHAMPS-generated Freedom Of Choice (FOC) form from that active LOCD record. Sign and date and retain in the individual's file.
- The provider may also choose to conduct a new LOCD.
- A new LOCD must be conducted if the current LOCD is not active or is no longer an accurate representation of the individual's current functional status.

LOCD Overview & Policy

- [MI Medicaid Provider Manual](#)
>> Chapter Nursing Facility
Level of Care Determination
>> Section 3.6 – Verification
Review of LOCD
- [LOCD Job Aids for Providers
webpage](#)

Verification Review of LOCD (LOCD-VR)

- The LOCD-VR is a randomly selected sample of LOCD records from newly admitted beneficiaries that are reviewed by MDHHS or its designee.
 - Also, to be selected there must be no active LOCD record
- The purpose of the LOCD-VR is to determine if the LOCD was conducted properly according to policy and resulted in the correct determination of eligibility.
- CHAMPS will immediately notify the provider if the LOCD was selected for review through a real-time “pop-up” notification.
 - The LOCD verification status will be changed to “Selected”
 - Providers will be required to upload relevant and supporting documentation. Reference the provider manual for suggested documentation.
- Documents must be uploaded electronically in CHAMPS within one business day of the LOCD being selected for verification review in CHAMPS.
 - Must include the CHAMPS LOCD Application ID on all documents.
- MDHHS or its designee will determine within 2 business days of receipt of supporting documentation
 - Verification status will change based on findings.

Verification Review of LOCD (LOCD-VR)

- LOCDs selected for Verification Review are not considered complete until MDHHS or its designee informs the provider within two business days of the result of the review in CHAMPS.
 - Results:
 - Approved
 - Provider needs to go back into the record and complete the Freedom of Choice form.
 - Rejected
 - A new LOCD record is created based on MDHHS or its designee's determination (i.e., Door 1-8 or zero).
 - Documents not available
 - Not a payable LOCD
 - Provider will need to conduct a new LOCD and enter it into CHAMPS. Providers are not allowed to utilize the LOCD assessment that is now associated to the "Documents not available" record.
- When the individual is found not to meet LOCD criteria, an [adequate action notice](#) including appeal rights will be provided by MDHHS or its designee to the individual (or their legal representative) and the provider.

LOCD Overview & Policy

- [MI Medicaid Provider Manual](#)
 - >> Chapter Nursing Facility Level of Care Determination
 - >> Section 5 – Informed Choice
- [Freedom of Choice Form](#)
 - If using this form not autogenerated from CHAMPS, the provider must complete the appropriate fields in Section I and sign and date the form.
 - Reminder: providers who choose to adopt a LOCD cannot use this form and must utilize the FOC from the adopted LOCD record.

Freedom of Choice (FOC)

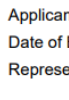
- The FOC form is intended to confirm that an individual was made aware of their LTSS options of admitting and/or enrolling into an NF or program. And/or that the beneficiary does not meet LOCD criteria of functional eligibility.
 - All Medicaid-funded LTSS programs are required to make program information available to individuals at admission/enrollment, at a face-to-face reassessment, and upon request from the individual or their legal representatives.
- A properly completed FOC documents the individual's choice of where to receive LTSS.
- It's important that an individual understands their options and has ongoing access to information about settings and programs.
- This form must be printed and signed and retained in the individual's file for three years.
- The LOCD summary may also be printed and retained for record keeping.

LOCD

Overview & Policy

- Application ID, Provider's Name, Provider's ID/NPI, Applicant's Name, Date of Birth, and Representative (if any) information will prepopulate.
- **Section I** – automatically populates when using CHAMPS to generate the form based on what was entered.
- **Section II** – provides a list of LTSS options available to individuals who meet LOCD criteria, including NF care MI Choice, PACE, or MI Health Link HCBS waiver programs.
- **Section III** – completed when an individual does not meet the LOCD criteria. Appeal rights must be provided.

Freedom of Choice (FOC)



MDHHS
Michigan Department of Health & Human Services

Application ID:

MICHIGAN MEDICAID NURSING FACILITY LEVEL OF CARE DETERMINATION (LOCD)

Provider's Name :

Provider's ID/NPI:

Applicant's Name:

Date of Birth : Created-on Date: 11/09/2022

Representative(if any):

SECTION I-MEDICAL/FUNCTIONAL ELIGIBILITY

Based on an LOCD medical/functional assessment of LTC needs conducted on 11/02/2022, the applicant indicated above: (date)

☒ **Does** meet the LOCD medical/functional criteria for Medicaid NF Level of Care by scoring in Door 4.

☐ **Does Not** meet the LOCD medical/functional criteria for Medicaid NF Level of Care (please proceed to Section III)

Signature of healthcare professional completing or adopting LOCD

Healthcare profession title

Date

SECTION II-FREEDOM OF CHOICE

I have been advised that I meet LOCD criteria and I am functionally eligible for any of the LTC programs listed below. I have received information about all LTC programs available in my area. I choose to receive services and supports from:

☐ MI Choice Waiver Program.

☐ Nursing Facility.

☐ PACE program.

☐ MI Health Link.

Other service option(s) and local referral(s) that do not require Medicaid Nursing Facility Level of Care:

Signature of applicant

Signature of applicant's representative

Date

SECTION III-APPEAL RIGHTS

I have received a copy of a denial of Medicaid NF Level of Care service based on the LOCD and understand my right to appeal.

Signature of applicant

Signature of applicant's representative

Date

LOCD Overview & Policy

- [MI Medicaid Provider Manual](#)
>> Chapter Nursing Facility
Level of Care Determination
>> Section 3.8 - Passive
Redetermination of
Functional Eligibility.

Passive Redetermination of Functional Eligibility

- This process allows CHAMPS to generate a new LOCD record for beneficiaries who meet certain door criteria.
- This process applies an algorithm that uses the most recent assessment and common data items from the interRAI Home Care Assessment System (iHC) and the Minimum Data Set (MDS).
 - When data items are received by MDHHS, this triggers the passive redeterminations process to begin.
 - All providers may adopt a CHAMPS-generated LOCD record.
- For the Passive Redetermination process to occur, the beneficiary must have an existing and active qualifying LOCD record:
 - A passive redetermination cannot find a beneficiary ineligible
 - Door 87 will be generated
 - A passive redetermination will NOT occur when the beneficiary has an active Door 0 record; the beneficiary does not have an existing LOCD record, or the beneficiary has an active Door 77 (Transfer Trauma) in a nursing facility.
 - A Door 87 record is not adoptable

Passive Redetermination Process: Conditions for Processing a Passive Redetermination file:

Must Have:

- A current admission or enrollment with the provider
- MiHealthLink: Must have a record in Enrollment File (i.e., specifically beneficiaries who are members of Health Plans)
- An active eligible LOCD within CHAMPS

Cannot Have:

- A previous assessment date greater than 180 days from the current CHAMPS date. (i.e., old data)
- An assessment date that is greater than the current CHAMPS date. (i.e., future date)
- Value null, Zero, or 99 in field A0310, (i.e., Assessment type) of the MDS report

LOCD Overview & Policy

- The correspondence between MDS and iHC assessment items and LOCD items is extensive but not complete.
- The process is able to confirm LOCD eligibility as shown.

Passive Redetermination Process

LOCD Doors Addressed by Passive Assessment	Generate a New LOCD
Door 1: Activities of Daily Living	Yes
Door 2: Cognitive Performance	Yes
Door 3: Physical Involvement	MDS – Yes
	iHC – No
Door 4: Treatments and Conditions	No
Door 5: Skilled Rehabilitation Therapy	Yes
Door 6: Behavior	MDS – Yes
	iHC – Partial
Door 7: Service Dependency	No
Door 8: Frailty	No

LOCD Overview & Policy

- [MI Medicaid Provider Manual](#)
>> Chapter Nursing Facility
Level of Care Determination
>> Section 3 – Nursing
Facility Level of Care
Determination Process.

Passive Redetermination Process

- When a beneficiary is currently eligible through Door 4 (Treatments & Conditions), 7 (Service Dependency), or 8 (Frailty) and the Passive Redetermination cannot confirm LOCD eligibility through a different qualifying Door, the passive redetermination will be bypassed, and the current Door end date will remain.
- Providers will need to continue to monitor their existing LOCD records if the member qualifies through Doors 4, 7, and 8.
- Signatures on the Freedom of Choice Form are not required for passive redetermination LOCDs.
 - Reminder, providers who choose to adopt a passive redetermination will still need to go into the LOCD record to sign the FOC.
- When a passive redetermination has confirmed continued functional eligibility, the
 - Start Date of the CHAMPS-generated LOCD record will be the date of the MDS or iHC assessment.
 - End Date will be set at 365 days from the newly established Start Date.

LOCD Overview & Policy

- [MI Medicaid Provider Manual](#)
>> Chapter Nursing Facility
Level of Care Determination
>> Section 3.8.B – Passive
Redetermination Process.

Passive Redetermination Process: Door 87

- When the passive redetermination process occurs but the process cannot confirm eligibility based on the MDS or iHC data, CHAMPS will create a LOCD Door 87.
 - Door 87 signifies to providers that a face-to-face assessment is needed as the passive process was not able to determine functional eligibility based on data received.
 - The end date for the door 87 LOCD record will be 45 days from the system date or the current LOCD end date; whichever is sooner.
- A CHAMPS My Inbox Alert will be sent to the entity where the beneficiary is admitted to or enrolled notifying them that a door 87 was created.
- Provider will have 45 days or the current LOCD end date (whichever is less) to complete a face-to-face assessment.
- A Door 87 cannot be adopted.

LOCD Overview & Policy

- [MI Medicaid Provider Manual](#)
>> Chapter Nursing Facility
Level of Care Determination
>> Section 6 – Individual
Does Not Meet LOCD
Criteria, Action Notices, and
Appeal Rights

When an Individual Does Not Meet LOCD Criteria

- If an individual does not meet LOCD criteria for Doors 1 through 7, the provider must provide notice to the individual.
- Individuals and/or their representatives have the right to ask for a Secondary Review and a Hearing.
- Action Notices to Individuals and Requirements:
 - Adverse: When an individual is determined ineligible for services and an appeal is requested. [DCH-0092](#), [Michigan Office of Administrative Hearings and Rules](#)
 - Adequate: For an individual who has not received prior LTSS services and the LOCD determined they do not meet LOCD criteria. [Nursing Facility](#), [MI Choice Program](#)
 - Advance: For an individual who is receiving LTSS services under an approved LOCD and a redetermination of the LOCD found the individual ineligible. [Nursing Facility](#), [MI Choice Program](#)
- Reference the [MI Health Link Program Specifics](#) slide for details.

LOCD Overview & Policy

- [MI Medicaid Provider Manual](#)
>> Chapter Nursing Facility
Level of Care Determination >>
- Section 6.4 – LOCD Secondary Review
- Section 6.5 – Appeal Rights and Medicaid Fair Hearing
- When a current LTSS beneficiary is determined to not meet LOCD criteria, the provider must follow program-specific procedures for the provision of notice to the beneficiary.

LOCD Secondary Review

- A provider or an individual or their representative can ask for a secondary review.
 - Only available after an LOCD has been entered in CHAMPS and resulted in a Door 0.
 - A review of documentation for all LOCD Doors, including Door 8.

Appeal Rights and Medicaid Fair Hearing

- The [Michigan Office of Administrative Hearings and Rules](#) (MOAHR) Administrative Hearings Pamphlet explains the process by which an administrative hearing and a preliminary conference are brought to completion.
- Reference slide [MI Health Link Program Specifics](#) for details.

MI Health Link Program Specifics

- MI Health Link standard includes Doors 1 – 8 (compared to Doors 1 – 7 for other programs).
- MI Health Link requires MDHHS or its designee review all Door 0's and provide a notice to the beneficiary and the provider.
- A MI Health Link beneficiary may request a Secondary Review.
 - If a Secondary review is requested when MDHHS/designee was the initial reviewer, a different MDHHS/designee reviewer will complete the second review of the LOCD than completed the first review.
- Integrated Care Organization Door 0's may also be selected for Verification Review.

LOCD Overview & Policy

Glossary

Term	Definition
Adequate Action Notice	Initial determinations (before services begin depending on the situation).
Advance Action Notice	For re-assessment of LOCDs (those already eligible and enrolled/admitted).
Adverse Action Notice	When an individual is determined ineligible for services and an appeal is requested. A broader term that includes adequate and advanced action.
Compliant LOCD	LOCD entered into CHAMPS within 14 days of Conducted Date Start Date = <i>Conducted Date</i> End Date = <i>Conducted Date + 365 days</i>
Conducted Date	The date the healthcare professional conducted the Face-to-Face assessment.
Created Date	The date the LOCD was entered into the CHAMPS system.
Door(s)	Door 1: Activities of Daily Living. Door 2: Cognitive Performance. Door 3: Physician Involvement. Door 4: Treatments and Conditions. Door 5: Skilled Rehabilitation Therapies. Door 6: Behavior. Door 7: Service Dependency. Door 8: Frailty. Door 9: Ineligible. Door 10: Eligible Pending Face-to-Face Reassessment.
Level of Care Determination	LOCD – Tool used to determine functional eligibility requirements.
Long Term Services & Supports	LTSS – Assistance with an individual's everyday activities of living to help them remain as independent as possible.
Non-compliant LOCD	LOCD entered into CHAMPS more than 14 days from Conducted Date Start Date = <i>Created Date</i> End Date = <i>Conducted Date + 365 days</i>

Entering an LOCD in CHAMPS

- [CHAMPS Overview](#)
- [Register for MILogin Account for Access to CHAMPS](#)

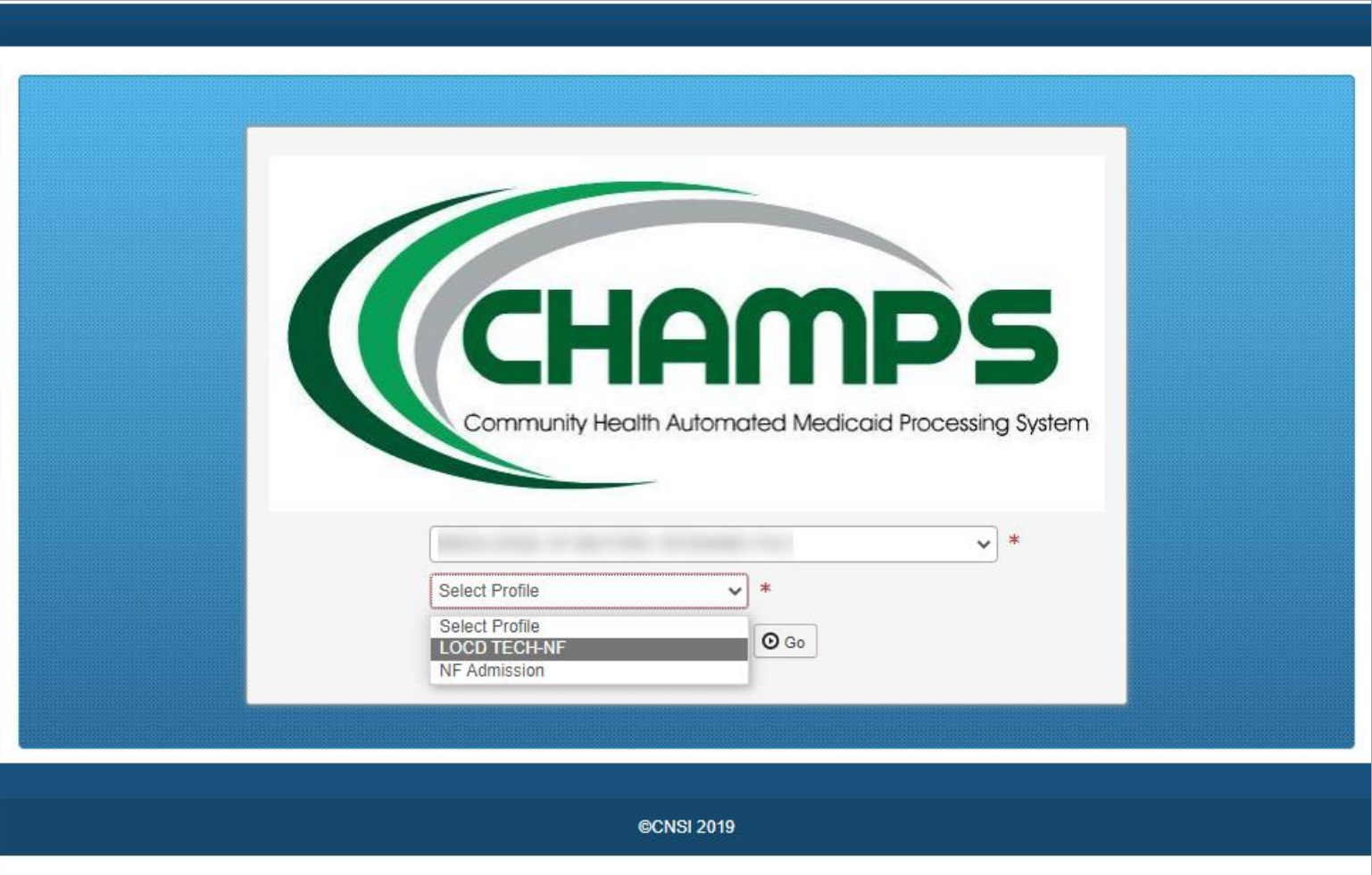
Entering an LOCD in CHAMPS

- [Register for MILogin Account](#)

- When entering the LOCD assessment in CHAMPS, a facility or program's CHAMPS Domain Administrator has access to the LOCD Tech-NF profile and can assign the profile to users who need to enter a LOCD into CHAMPS.
 - For Domain Administrators who need assistance in assigning a profile to a user reference the [Domain Administrator Functions](#) resource.
- In cases where there is a new nursing facility, Change of Ownership (CHOW), or program change, notice is given to the MDHHS Provider Enrollment section to add the LOCD Tech-NF profile to the National Provider Identifier (NPI) for the Domain Administrator.

Entering an LOCD in CHAMPS

- To enter a LOCD select the LOCD TECH-NF profile when logging into CHAMPS.
- For Domain Administrators who need assistance in assigning a profile to a user reference the [Domain Administrator Functions](#) resource.



The screenshot displays the CHAMPS login page. At the top, the CHAMPS logo is shown with the text "Community Health Automated Medicaid Processing System" below it. Below the logo, there is a login form. The form includes a text input field for a username, a "Select Profile" dropdown menu, and a "Go" button. The "Select Profile" dropdown menu is open, showing three options: "Select Profile", "LOCD TECH-NF", and "NF Admission". The "LOCD TECH-NF" option is highlighted. The "Go" button is located to the right of the dropdown menu. The background of the login form is white, and the overall page has a blue header and footer. The footer contains the text "©CNSI 2019".

CHAMPS
Community Health Automated Medicaid Processing System

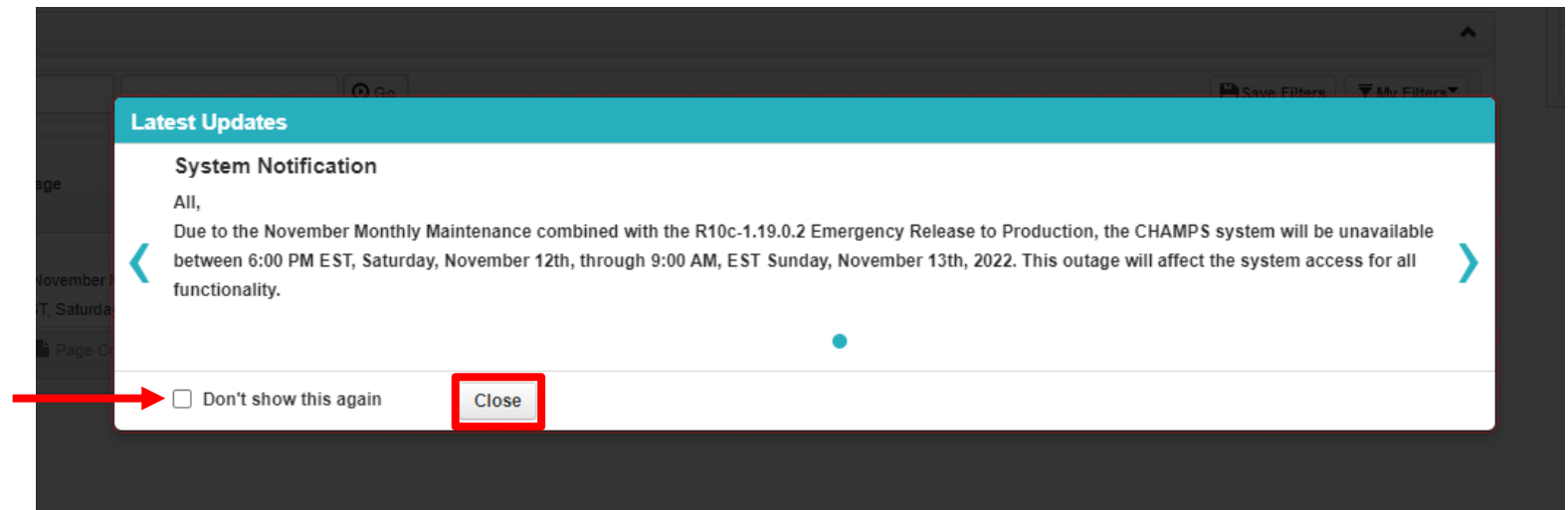
Select Profile
LOCD TECH-NF
NF Admission

Go

©CNSI 2019

Entering an LOCD in CHAMPS

- System update notification.
- Two options to close out:
 - Select the Close button and the notification will pop-up each time CHAMPS is logged into; or
 - Check the box next to Don't show this again and then, click on Close and the pop-up will not open again.
- System updates will continue to remain on the My Inbox Landing page as well.



Entering an LOCD in CHAMPS

- To enter an LOCD into CHAMPS providers must first go to the LOCD List page.
 - To go to the LOCD List Page, click Member, then Level of Care Determination.
- Note: On the My Inbox Landing page under My Reminders is where providers can view notifications about upcoming LOCD end dates or requests to upload documents.

The screenshot displays the CHAMPS web application interface. At the top, there is a navigation bar with tabs for 'My Inbox', 'Provider', and 'Member'. A red arrow points from the 'Member' tab to a dropdown menu that includes 'LOCD' and 'Level of Care Determination'. Below the navigation bar, the main content area shows a 'Latest updates' section with a 'System Notification' about November maintenance. Below that is a 'My Reminders' section with a table of alerts. On the right side, there is a 'Calendar' widget showing the date 9 November 2022.

CHAMPS < My Inbox Provider Member

Last Login: 09:11

LOCD Level of Care Determination

NPI: Name:

Latest updates

System Notification

All,
Due to the November Monthly Maintenance combined with the R10c-1.19.0.2 Emergency Release to Production, the CHAMPS system will be unavailable between 6:00 PM EST, Saturday, November 12th, through 9:00 AM, EST Sunday, November 13th, 2022. This outage will affect the system access for all functionality.

My Reminders

Filter By [] [] Go Save Filters My Filters

Alert Type	Alert Message	Alert Date	Due Date	Read	Tickler Modified Date
<input type="checkbox"/> BROADCAST_MESSAGE	All, Due to the November Monthly Maintenance combined with the R10c-1.19.0.2 Emergency Release to Production, the CHAMPS system will be unavailable between 6:00 PM EST, Saturday, November 12th, through 9:00 AM, EST Sunday, November 13...	11/09/2022	11/13/2022	Y	11-09-2022 09:11:19

View Page: 1 Go Page Count Save to Excel Viewing Page: 1 << First < Prev > Next >> Last

Calendar

14:24 9 November 2022 Wednesday

Mo	Tu	We	Th	Fr	Sa	Su
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30				

Today

Entering an LOCD in CHAMPS

- This is the LOCD List Page
- It defaults to show the LOCDs of the enrolled or admitted beneficiaries under the Billing Provider NPI that is logged in.
- To search for a current LOCD utilize the filter by fields. For step-by-step instructions skip to [slide 51](#).
- To start a new LOCD click on Create.

CHAMPS < My Inbox > Provider > Member >

Last Login: 09 NOV, 2022 02:16 PM

Provider Portal > LOCD List

Close Create

To Search member's LOCD records, complete one of the following criteria:

- Application ID of the LOCD record, OR
- Member ID of the beneficiary, OR
- SSN of the beneficiary, OR
- First Name, Last Name, and Last 4 digits of the SSN, OR
- First Name, Last Name, and DOB, OR
- First Name, DOB, and the Last 4 digits of the SSN, OR
- Last Name, DOB, and the Last 4 digits of the SSN, OR
- DOB and the Last 4 digits of the SSN

The System will not display any records if the filter by combinations match to more than one member.

LOCD List

Filter By Filter By Filter By And Active Go Save Filters My Filters

Actions	Application ID	Member ID	First Name	Last Name	Provider ID/NPI	Provider Name	Door	Conducted Date	Created Date	Start Date	End Date	Created By	Modified Date	Program Type	LOCD Method	Review Type	Application Status	Verification Status
Action							1	09/23/2022	09/23/2022	09/23/2022	10/19/2022		10/26/2022	Nursing Facility	Face To Face Review	LOCD	Completed	Not Selected
Action							1	10/20/2022	10/26/2022	10/20/2022	10/20/2023		10/26/2022	Nursing Facility	Face To Face Review	LOCD	Completed	Not Selected
Action							1	03/16/2022	03/16/2022	03/16/2022	09/22/2022		09/23/2022	Nursing Facility	Passive Redetermination	LOCD	Completed	Not Selected
Action							1	09/23/2022	09/23/2022	09/23/2022	09/23/2023		09/23/2022	Nursing Facility	Face To Face Review	LOCD	Completed	Not Selected
Action							1	04/13/2022	04/13/2022	04/13/2022	09/22/2022		09/23/2022	Nursing Facility	Passive Redetermination	LOCD	Completed	Not Selected
Action							1	05/20/2019	05/21/2019	05/20/2019	03/05/2023		09/08/2022	Nursing Facility	Face To Face Review	LOCD	Completed	Not Selected
Action							1	05/14/2021	05/18/2021	05/14/2021	02/08/2023		09/08/2022	Nursing Facility	Face To Face Review	LOCD	Completed	Not Selected
Action							1	05/19/2021	05/28/2021	05/19/2021	02/13/2023		09/08/2022	Nursing Facility	Face To Face Review	LOCD	Completed	Not Selected

Entering an LOCD in CHAMPS

- The Welcome screen will pop-up to initiate the LOCD record.
- Review the Welcome to Michigan's Medicaid Nursing Facility Level of Care Determination and click Proceed.

Print Help

Level of Care Determination

Reset Close

Welcome

Welcome to Michigan's Medicaid Nursing Facility Level of Care Determination

Sections 1919a, 1915c and 1934 of the Social Security Act provide legal authority for State Medicaid Agencies to develop their own definition of nursing facility level of care. The Michigan Medicaid Nursing Facility Level of Care Determination (LOCD) is Michigan's functional assessment that determines an individual's eligibility to receive Medicaid reimbursed long term care services and supports (LTSS). Individuals seeking LTSS services from a Medicaid-certified nursing facility, MI Choice Home and Community Based Waiver for the Elderly and Disabled (MI Choice), the Program of All-Inclusive Care for the Elderly (PACE) or MI Health Link Waiver must meet criteria outlined in the LOCD.

The LOCD must be conducted face-to-face by a qualified and licensed health care professional on behalf of the State of Michigan for Medicaid-certified nursing facility, MI Choice, PACE and MI Health Link Waiver individuals seeking LTSS services.

The LOCD consists of Doors of possible eligibility. Each Door addresses a specific set of criteria through which an individual may be eligible.

Information necessary to conduct an accurate assessment of the individual's functional self-performance abilities must be obtained through direct observation and communication with the individual and, if applicable, their designated representative(s). Additional medical documents such as physician or hospital records may be reviewed to assist in establishing whether the individual meets LOCD criteria.

Medicaid-certified nursing facilities, PACE, and MI Choice may contact the Michigan Peer Review Organization (MPRO) to request a Secondary Review on behalf of an LOCD ineligible individual. MPRO's toll free telephone number is 800-727-7223. MPRO may be contacted between the hours of 8:00 A.M. and 5:00 P.M. Monday through Friday. Select 'LTC Care exception criteria' from MPRO's phone menu.

The LOCD meets HIPAA compliance and is available seven days a week, 24 hours per day. Policy specific to the LOCD requirements and application is available in the Medicaid Provider Manual.

Proceed Close

Entering an LOCD in CHAMPS

- Enter the Beneficiary Information:
 - This can be done by entering a Medicaid ID and pressing Tab (i.e., from the keyboard) for the rest of the beneficiary information to populate; or
 - For individuals where eligibility has not been established, enter their First Name, Last Name, Date of Birth, and full social security number.
- Note: Any field with an asterisk (*) is required.

The screenshot shows the 'Level of Care Determination' application form in the CHAMPS system. The left sidebar contains a navigation menu with 'Basic Information' selected. The main form area is titled 'Application Information' and includes a 'CHAMPS Provider ID' field. The 'Beneficiary Information' section is highlighted with a red border and contains the following fields: 'Medicaid ID' (with a red arrow pointing to it), 'First Name', 'Middle Initial', 'Last Name', 'Date of Birth' (with a calendar icon), 'SSN' (with a masked format '###-##-####'), and 'Representative (If Applicable)'. Below this is the 'LOCD Information' section, which includes: 'Provider Conducting LOCD' (a dropdown menu), 'Name (Licensed Professional who Conducted Assessment)' (a text field), 'Conducted Date' (with a calendar icon), 'Type of Provider Conducting LOCD' (a dropdown menu showing 'NURSING FACILITY'), 'LOCD Entered in CHAMPS by' (a text field showing 'LOCD,UAT'), 'Phone (Licensed Professional)' (with a masked format '###-###-####'), 'License Type (Licensed Professional who Conducted Assessment)' (a dropdown menu showing '--SELECT--'), 'Created Date' (with a calendar icon showing '11/09/2022'), and 'LOCD Method' (a dropdown menu showing 'Face To Face Review'). The form has 'Print' and 'Help' buttons at the top left, and a 'Next' button at the bottom right.

Entering an LOCD in CHAMPS

- After the beneficiary information has populated scroll down to the LOCD Information.
- Provider Conducting LOCD will prepopulate based on the NPI logged in.
- Type of Provider Conducting LOCD, LOCD Entered in CHAMPS by, Created Date, and LOCD Method will also prepopulate.
- Provider will need to fill in the Name of the licensed professional who conducted the assessment, the date the assessment was conducted on, the phone number of the professional, and lastly, the License Type of the professional.
- Click Next once completed.
- Note: The conducted date has to be within 14 calendar days of the LOCD Created Date.

The screenshot shows the 'Level of Care Determination' application form in the CHAMPS system. The left sidebar contains a navigation menu with 'Welcome', 'Basic Information', 'Application information', 'Doors', 'Freedom of Choice', 'Upload Documents', and 'Helpful Links'. The 'Application Information' section is active, showing 'CHAMPS Provider ID: [redacted]'. Below this is the 'Beneficiary Information' section with fields for Medicaid ID, First Name, Middle Initial, Last Name, Date of Birth, SSN, and Representative. The 'LOCD Information' section is highlighted with a red border and contains the following fields: Provider Conducting LOCD (prepopulated with 'CHAMPS Provider ID: [redacted]'), Name (Licensed Professional who Conducted Assessment), Conducted Date, Type of Provider Conducting LOCD (prepopulated with 'NURSING FACILITY'), LOCD Entered in CHAMPS by (prepopulated with 'LOCD,UAT'), Phone (Licensed Professional), License Type (Licensed Professional who Conducted Assessment) (prepopulated with '--SELECT--'), Created Date (prepopulated with '11/09/2022'), and LOCD Method (prepopulated with 'Face To Face Review'). A 'Next' button is located at the bottom right of the form.

Entering an LOCD in CHAMPS

- The following list provides general guidelines for recording accurate Activities of Daily Living (ADL) self-performance.
- Select the appropriate code based on the individual's assessment for each ADL.
- Once complete scroll down to Next/Freedom Of Choice.
 - If qualified through Door 1 = FOC
 - If does not qualify through Door 1 = Next
- [Michigan Medicaid LOCD Field Definition Guidelines >>](#) Reference Door 1 Activities of Daily Living for guidance.

Level of Care Determination

Door 1 - Activities of Daily Living

Bed Mobility

How the applicant moves to and from lying position, turns side to side, and positions body while in bed (sleeping surface).

- ☐ **Independent**
No help or oversight, OR help or oversight provided only 1 or 2 times during last 7 days.
- ☐ **Supervision**
Oversight, encouragement or cueing provided 3 or more times during last 7 days, OR supervision 3 or more times plus physical assistance provided only 1 or 2 times during last 7 days.
- ☐ **Limited Assistance**
Applicant highly involved in activity, received physical help in guided maneuvering of limbs or other non-weight-bearing assistance 3 or more times, OR more help provided only 1 or 2 times during last 7 days.
- ☐ **Extensive Assistance**
While the applicant performed part of activity over last 7-day period, help of following type(s) provided 3 or more times:
 - Weight-bearing support
 - Full performance by another during part, but not all, of last 7 days
- ☐ **Total Dependence**
Full performance of activity by another during entire 7 days.
- ☐ **Activity did not occur**
Activity did not occur during entire 7 days (regardless of ability).

Transfers

How the applicant moves between surfaces, to/from bed (sleeping surface), chair, wheelchair, standing position (exclude to/from bath/toilet).

Toilet Use

How the applicant uses the toilet room (or commode, bedpan, urinal), transfers on/off toilet, cleanses, changes pad, manages ostomy or catheter, and adjusts clothes.

- ☐ **Independent**
No help or oversight, OR help or oversight provided only 1 or 2 times during last 7 days.
- ☐ **Supervision**
Oversight, encouragement or cueing provided 3 or more times during last 7 days, OR supervision 3 or more times plus physical assistance provided only 1 or 2 times during last 7 days.
- ☐ **Limited Assistance**
Applicant highly involved in activity, received physical help in guided maneuvering of limbs or other non-weight-bearing assistance 3 or more times, OR more help provided only 1 or 2 times during last 7 days.
- ☐ **Extensive Assistance**
While the applicant performed part of activity over last 7-day period, help of following type(s) provided 3 or more times:
 - Weight-bearing support
 - Full performance by another during part, but not all, of last 7 days
- ☐ **Total Dependence**
Full performance of activity by another during entire 7 days.
- ☐ **Activity did not occur**
Activity did not occur during entire 7 days (regardless of ability).

Eating

How the applicant eats and drinks (regardless of skill). Includes intake of nourishment by other means (i.e., tube feeding, total parenteral nutrition).

- ☐ **Independent**
No help or oversight, OR help or oversight provided only 1 or 2 times during last 7 days.
- ☐ **Supervision**
Oversight, encouragement or cueing provided 3 or more times during last 7 days, OR supervision 3 or more times plus physical assistance provided only 1 or 2 times during last 7 days.
- ☐ **Limited Assistance**
Applicant highly involved in activity, received physical help in guided maneuvering of limbs or other non-weight-bearing assistance 3 or more times, OR more help provided only 1 or 2 times during last 7 days.
- ☐ **Extensive Assistance**
While the applicant performed part of activity over last 7-day period, help of following type(s) provided 3 or more times:
 - Weight-bearing support
 - Full performance by another during part, but not all, of last 7 days
- ☐ **Total Dependence**
Full performance of activity by another during entire 7 days.
- ☐ **Activity did not occur**
Activity did not occur during entire 7 days (regardless of ability).

Next / Freedom Of Choice

Entering an LOCD in CHAMPS

- If the individual qualifies under Door 1, providers will receive the displayed pop-up, "The data entered qualifies the applicant for care under door 1. Click OK to proceed to Freedom of Choice."

PrintHelp

Level of Care Determination

Welcome

Basic Information

Doors

Freedom of Choice

Upload Documents

Helpful Links

Door1

Door2

Door3

Door4

Door5

Door6

Door7

Freedom of Choice

Upload Documents

Helpful Links

Level of Care Determination

provid

Extens

While

Weight-bearing support

Full performance by another during part, but not all, of last 7 days

Total Dependence

Full performance of activity by another during entire 7 days.

Activity did not occur

Activity did not occur during entire 7 days (regardless of ability).

Eating

How the applicant eats and drinks (regardless of skill). Includes intake of nourishment by other means (i.e., tube feeding, total parenteral nutrition).

Independent

No help or oversight, OR help or oversight provided only 1 or 2 times during last 7 days.

Supervision

Oversight, encour. times during last 7

fed 3 or more times during last 7 days, OR supervision 3 or more times plus physical assistance provided only 1 or 2

Limited Assistance

Applicant highly in provided only 1 or

d physical help in guided maneuvering of limbs or other non-weight-bearing assistance 3 or more times, OR more help

Extensive Assistance

While the applicant performed part of activity over last 7-day period, help of following type(s) provided 3 or more times:

- Weight-bearing support
- Full performance by another during part, but not all, of last 7 days

Total Dependence

Full performance of activity by another during entire 7 days.

Activity did not occur

Activity did not occur during entire 7 days (regardless of ability).

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The data entered qualifies the applicant for care under door 1. Click OK to proceed to Freedom of Choice Form.

OK

Cancel

ResetClose

Following type(s) provided 3 or more times:

LOADING...

Next / Freedom Of Choice

Entering an LOCD in CHAMPS

- Door 2 will open if the individual is found not to be eligible under Door 1.
- Door 2 is for cognitive performance. It identifies applicants with cognitive difficulties with short-term memory or decision-making skills.
- Once completed click Next/Freedom of Choice
- [Michigan Medicaid LOCD Field Definition Guidelines](#) >> Reference Door 2 Cognitive Performance for guidance.

The screenshot shows the 'Level of Care Determination' form in the CHAMPS system. The left sidebar contains a navigation menu with 'Welcome', 'Basic Information', 'Doors', 'Freedom of Choice', 'Upload Documents', and 'Helpful Links'. The 'Doors' section is expanded, showing 'Door1' (checked), 'Door2' (selected with a green circle), and 'Door3' through 'Door7'. The main content area is titled 'Door 2 - Cognitive Performance'. It contains three sections: 'Short-term memory', 'Cognitive skills for daily decision-making', and 'Making self understood'. Each section has a description and a list of radio button options. The 'Short-term memory' section has two options: 'Memory Okay' and 'Memory Problem'. The 'Cognitive skills for daily decision-making' section has four options: 'Independent', 'Modified Independent', 'Moderately Impaired', and 'Severely Impaired'. The 'Making self understood' section has four options: 'Understood', 'Usually Understood', 'Sometimes Understood', and 'Rarely/Never Understood'. At the bottom right, there is a red button labeled 'Next / Freedom Of Choice'. The top of the form has a blue header with 'Print' and 'Help' icons, and a grey bar with 'Level of Care Determination', 'Reset', and 'Close' icons.

Print Help

Level of Care Determination Reset Close

Welcome Basic Information Doors Freedom of Choice Upload Documents Helpful Links

Door1 Door2 Door3 Door4 Door5 Door6 Door7

Door 2 - Cognitive Performance

Short-term memory

Short-term memory

☐ **Memory Okay**
Memory Okay (seems/appears to recall after 5 minutes)

☐ **Memory Problem**
Memory Problem

Cognitive skills for daily decision-making

Cognitive skills for daily decision-making (made decisions regarding tasks of daily life for last 7 days).

☐ **Independent**
The applicant's decisions were consistent and reasonable (reflecting lifestyle, culture, values); the applicant organized daily routine and made decisions in a consistent, reasonable, and organized fashion.

☐ **Modified Independent**
The applicant organized daily routine and made safe decisions in familiar situations, but experienced some difficulty in decision-making when faced with new tasks or situations.

☐ **Moderately Impaired**
The applicant's decisions were poor; the applicant required reminders, cues, and supervision in planning, organizing, and correcting daily routines.

☐ **Severely Impaired**
The applicant's decision-making was severely impaired, the applicant never (or rarely) made decisions.

Making self understood

Making self understood (expressing information content, however able).

☐ **Understood**
The applicant expresses ideas clearly, without difficulty.

☐ **Usually Understood**
The applicant has difficulty finding the right words or finishing thoughts, resulting in delayed responses. If given time, little or no prompting required.

☐ **Sometimes Understood**
The applicant has limited ability, but is able to express concrete requests regarding at least basic needs (i.e., food, drink, sleep, toilet).

☐ **Rarely/Never Understood**
At best, understanding is limited to interpretation of highly individual, applicant-specific sounds or body language (i.e., indicated presence of pain or need to toilet).

Next / Freedom Of Choice

Entering an LOCD in CHAMPS

- Door 3 will open if the individual is found not to be eligible under Door 2.
- Applicants with significant clinical instability may be appropriate for long-term care programs.
- Door 3 requires the frequency of healthcare worker visits (i.e., exams) within the last 14 days.
- Once completed click Next/Freedom of Choice
- [Michigan Medicaid LOCD Field Definition Guidelines >>](#)
Reference Door 3 Physician Involvement for guidance.

The screenshot shows the CHAMPS Level of Care Determination (LOCD) form. The left sidebar contains a navigation menu with the following items: Welcome, Basic Information, Doors (highlighted), Freedom of Choice, Upload Documents, and Helpful Links. Under the 'Doors' section, Door1, Door2, Door3, Door4, Door5, Door6, and Door7 are listed. Door3 is currently selected. The main content area is titled 'Door 3 - Physician Involvement'. It contains the following text: 'Is the applicant under the care of a physician for treatment of an unstable medical condition?'. Below this, there are two sections: 'A. Physician Visits: In the last 14 days, how many days has the physician, or authorized assistant or practitioner, examined the applicant? Do not count emergency room exams. Enter "0" if none.' and 'B. Physician Orders: In the last 14 days, how many days has the physician, or authorized assistant or practitioner, changed the applicant's orders? Do not include drug or treatment order renewals without change. Enter "0" if none.' Each section has a corresponding input field. At the bottom right of the form, there is a red button labeled 'Next / Freedom Of Choice'. The top of the form has a header bar with 'Print' and 'Help' icons, and a 'Level of Care Determination' title. The top right corner has 'Reset' and 'Close' buttons.

Entering an LOCD in CHAMPS

- Door 4 will open if the individual is found not to be eligible under Door 3.
- This door includes the assessment for conditions that can predict potential frailty or increased health risk.
- Door 4 requires the selection of yes or no for each treatment and condition.
- Once completed click Next/Freedom of Choice
- [Michigan Medicaid LOCD Field Definition Guidelines >>](#)
Reference Door 4 Treatments and Conditions for guidance.

Print Help

Level of Care Determination

Reset Close

Welcome

Basic Information

Doors

Freedom of Choice

Upload Documents

Helpful Links

Door1

Door2

Door3

Door4

Door5

Door6

Door7

Door 4 - Treatments and Conditions

Has the applicant in the last 14 days received any of the following health treatments, or demonstrated any of the following health conditions? These conditions require a physician-documented diagnosis in the medical record. Applicants will not qualify under Door 4 when the conditions have been resolved, or they no longer affect functioning or the need for care. It is required that an active restorative nursing and discharge plan be developed and used as the focus for treatment. Unless otherwise noted, score each item for the last 14-day timeframe. The 14-day look-back period is based on the eligibility determination date.

Complete each item below, either Yes or No

	Yes	No
A.Stage 3-4 pressure sores	<input type="radio"/>	<input type="radio"/>
B.Intravenous or parenteral feedings	<input type="radio"/>	<input type="radio"/>
C.Intravenous medications	<input type="radio"/>	<input type="radio"/>
D.End - Stage Care	<input type="radio"/>	<input type="radio"/>
E.Daily tracheostomy care, daily respiratory care, daily suctioning	<input type="radio"/>	<input type="radio"/>
F.Pneumonia within the last 14 days	<input type="radio"/>	<input type="radio"/>
G.Daily oxygen therapy	<input type="radio"/>	<input type="radio"/>
H.Daily insulin with two order changes in last 14 days	<input type="radio"/>	<input type="radio"/>
I.Peritoneal or hemodialysis	<input type="radio"/>	<input type="radio"/>

Next / Freedom Of Choice

Entering an LOCD in CHAMPS

- Door 5 will open if the individual is found not to be eligible under Door 4.
- This section identifies the presence of rehabilitation interventions based on ordered and scheduled therapy services.
- Once completed click Next/Freedom of Choice
- [Michigan Medicaid LOCD Field Definition Guidelines >>](#)
Reference Door 5 Skilled Rehabilitation Therapies for guidance.

Print Help

Level of Care Determination

Reset Close

Welcome ✓

Basic Information ✓

Doors

Door1 ✓

Door2 ✓

Door3 ✓

Door4 ✓

Door5 ✓

Door6

Door7

Freedom of Choice

Upload Documents

Helpful Links

Door 5 - Skilled Rehabilitation Therapies

Is the applicant currently receiving any skilled rehabilitation therapies?

Record the total minutes each of the following therapies was administered or scheduled (for at least 15 minutes a day) in the last 7 days. Enter "0" if none or less than 15 minutes daily.

A = Total number of minutes provided in last 7 days
B = Total number of minutes scheduled but not yet administered

	A	B
1. Speech Therapy	<input type="text"/>	<input type="text"/>
2. Occupational Therapy	<input type="text"/>	<input type="text"/>
3. Physical Therapy	<input type="text"/>	<input type="text"/>

Next / Freedom Of Choice

Entering an LOCD in CHAMPS

- Door 6 will open if the individual is found not to be eligible under Door 5.
- This door identifies applicants who display repetitive behavioral challenges as well as problem conditions that impact the applicant's ability to live independently in the community.
- Once completed click Next/Freedom of Choice
- [Michigan Medicaid LOCD Field Definition Guidelines](#) >> Reference Door 6 Behavior for guidance.

Print Help

Level of Care Determination

Reset Close

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Door1

Door2

Door3

Door4

Door5

Door6

Door7

Door 6 - Behavior

Has the applicant displayed any challenging behaviors in the last 7 days?

Behavioral Code:

0 = Behavior not exhibited in last 7 days

1 = Behavior of this type occurred 1 to 3 days in last 7 days

2 = Behavior of this type occurred 4 to 6 days, but less than daily

3 = Behavior of this type occurred daily

Behavioral Symptoms

Wandering - Applicant moved with no rational purpose, seemingly oblivious to needs and safety. Do not include pacing as a wandering behavior.

Verbally Abusive - Applicant threatened, screamed or cursed at others.

Physically Abusive - Applicant hit, shoved, scratched or sexually abused others.

Socially Inappropriate/Disruptive - Applicant made disruptive sounds, noisiness, screaming, self-abusive acts, inappropriate sexual behavior or disrobing in public, smeared or threw food/feces, hoarded or rummaged through others' belongings.

Resists Care - Applicant resisted taking medications or injections, ADL assistance or eating. Applicant may have resisted by pushing caregiver during ADL assistance. Resisting care does not include instances where the applicant has made an informed choice not to follow a course of care and has exercised his or her right to refuse treatment and reacts negatively as others try to re-institute treatment.

Problem Conditions

Problem Condition Code: If present at any point in the last 7 days, code either Yes or No.

A. Delusions

B. Hallucinations

0 1 2 3

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Yes No

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Next / Freedom Of Choice

Entering an LOCD in CHAMPS

- Door 7 will open if the individual is found not to be eligible under Door 6.
- This section is for applicants who reside in a Medicaid-certified nursing facility or are participating in MI Choice, PACE, or MI Health Link program.
- Individuals must meet all three criteria listed to qualify under Door 7.
- Once completed click Next/Freedom of Choice
- [Michigan Medicaid LOCD Field Definition Guidelines](#) >> Reference Door 7 Service Dependency for guidance.

PrintHelp

Level of Care Determination

ResetClose

Welcome✓

Basic Information✓

Doors

Door1✓

Door2✓

Door3✓

Door4✓

Door5✓

Door6✓

Door7

Freedom of Choice

Upload Documents

Helpful Links

Door 7 - Service Dependency

This section refers to applicants who are currently residents of a Medicaid-certified nursing facility, or a current participant in MI Choice, PACE or MI Health Link. Door 7 consists of three criteria. All three criteria must be met to qualify under Door 7. The 'One consecutive Year' requirement is defined as being a resident of a Medicaid Certified Nursing Facility or participant of MI Choice, PACE or MI Health Link for at least one year. You may combine time across these programs, however, there cannot be a break in coverage between, or during, the beneficiary's stay.

One Consecutive Year Example: NF resident January 1, 2014, through June 25, 2014, then a MI Choice participant June 26, 2014, through September 7, 2014, then a PACE participant September 8, 2014, through January 3, 2015. The One consecutive Year is not met if there was one day within the past 365 days the beneficiary was not in any of the above programs or facility.

If service can be met by other programs, such as Home Help, the beneficiary does not qualify under Criteria Number 3 below.

☐ Does Meet ALL of the Following Three Criteria (select this option ONLY if ALL of the following are met)

1. Participant for at least one consecutive year (no break in coverage).

2. Requires ongoing services to maintain current functional status.

3. No other community, residential, or informal services are available to meet the applicant's needs (i.e., only the current setting can provide service needs).

☐ Does Not Meet ALL of the Following Three Criteria

1. Participant for at least one consecutive year (no break in coverage).

2. Requires ongoing services to maintain current functional status.

3. No other community, residential, or informal services are available to meet the applicant's needs (i.e., only the current setting can provide service needs).

Next / Freedom Of Choice

Entering an LOCD in CHAMPS Freedom of Choice

- If all seven doors have been gone through and the individual does not qualify through any door, the Freedom of Choice (FOC) will display Door 0 (zero) indicating no Medical/Functional Eligibility was determined for the individual.
- The FOC will explain that the individual does not meet the LOCD medical/functional criteria for Medicaid LTSS and providers are required to give individuals their rights for an appeal.
- Reminder: An ineligible applicant must sign the FOC form in acknowledgment of having been advised in writing of his functional/medical eligibility and the right to appeal the LOCD.
- Click Submit and skip to [slide 42](#).

Print Help

Level of Care Determination

Application ID: _____

MDHHS
Michigan Department of Health & Human Services

FREEDOM OF CHOICE

Provider's Name: _____

Applicant's Name: _____

Representative (if any): _____

Provider's ID/NPI: _____

Date of Birth: _____

LOCD Created-On Date: _____

SECTION I-MEDICAL/FUNCTIONAL ELIGIBILITY

Based on an LOCD medical/functional assessment of LTC needs conducted on **01/03/2023**, the applicant indicated above:

☐ Does meet the LOCD medical/functional criteria for Medicaid NF Level of Care by scoring in **Door 0**.

☒ Does Not meet the LOCD medical/functional criteria for Medicaid NF Level of Care (please proceed to Section III)

Signature of healthcare professional completing or adopting LOCD

Healthcare profession title

Date

SECTION II - FREEDOM OF CHOICE

I have been advised that I meet LOCD criteria and I am functionally eligible for any of the LTC programs listed below. I have received information about all LTC programs available in my area. I choose to receive services and supports from:

☐ MI Choice Waiver Program.

☐ Nursing Facility.

☐ PACE Program.

☐ MI Health Link.

Other service option(s) and local referral(s) that do not require Medicaid Nursing Facility Level of Care:

Signature of applicant

Signature of applicant's representative

Date

SECTION III - APPEAL RIGHTS

I have received a copy of a denial of Medicaid NF Level of Care service based on the LOCD and understand my right to appeal.

Signature of applicant

Signature of applicant's representative

Date

Submit Print FOC Print Summary

Entering an LOCD in CHAMPS

- If the individual is found eligible for a door, click Next/Freedom of Choice. A pop-up will display signifying the door the individual is eligible through.
- Click Ok to continue or click Cancel to return to the LOCD for changes.

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The data entered qualifies the applicant for care under door 4. Click OK to proceed to Freedom of Choice Form.

OK Cancel

Level of Care Determination

Door 4 - Treatments and Conditions

Has the applicant in the last 14 days received any of the following conditions? These conditions require a physician-documented diagnosis in the medical record. Applicants will not qualify under Door 4 when the conditions have been resolved, or they no longer affect functioning or the need for care. It is required that an active restorative nursing and discharge plan be developed and used as the focus for treatment. Unless otherwise noted, score each item for the last 14-day timeframe. The 14-day look-back period is based on the eligibility determination date.

Complete each item below, either Yes or No.

	Yes	No
A.Stage 3-4 pressure sores	<input type="radio"/>	<input checked="" type="radio"/>
B.Intravenous or parenteral feedings	<input checked="" type="radio"/>	<input type="radio"/>
C.Intravenous medications	<input checked="" type="radio"/>	<input type="radio"/>
D.End - Stage Care	<input type="radio"/>	<input checked="" type="radio"/>
E.Daily tracheostomy care, daily respiratory care, daily suctioning	<input type="radio"/>	<input checked="" type="radio"/>
F.Pneumonia within the last 14 days	<input type="radio"/>	<input checked="" type="radio"/>
G.Daily oxygen therapy	<input type="radio"/>	<input checked="" type="radio"/>
H.Daily insulin with two order changes in last 14 days	<input type="radio"/>	<input checked="" type="radio"/>
I.Peritoneal or hemodialysis	<input type="radio"/>	<input checked="" type="radio"/>

LOADING...

Next / Freedom Of Choice

Entering an LOCD in CHAMPS

- After clicking Ok, providers are taken to the Freedom of Choice Form.
- If the prepopulated information is accurate, and the individual has been provided with their LTSS options and agrees with their medical/functional eligibility, click Submit.
- Reminder: The healthcare professional conducting the LOCD for the applicant must provide information on the program the applicant selects.

Print Help

Level of Care Determination

Reset XClose

Application ID:

MDHHS
Michigan Department of Health & Human Services

FREEDOM OF CHOICE

Provider's Name: _____

Applicant's Name: _____

Representative (if any): _____

Provider's ID/NPI: _____

Date of Birth: _____

LOCD Created-On Date: _____

SECTION I - MEDICAL/FUNCTIONAL ELIGIBILITY

Based on an LOCD medical/functional assessment of LTC needs conducted on **11/02/2022**, the applicant indicated above:

☒ Does meet the LOCD medical/functional criteria for Medicaid NF Level of Care by scoring in **Door 4**.

☐ Does Not meet the LOCD medical/functional criteria for Medicaid NF Level of Care (please proceed to Section III)

Signature of healthcare professional completing or adopting LOCD

Healthcare profession title

Date

SECTION II - FREEDOM OF CHOICE

I have been advised that I meet LOCD criteria and I am functionally eligible for any of the LTC programs listed below. I have received information about all LTC programs available in my area. I choose to receive services and supports from:

☐ MI Choice Waiver Program.

☐ Nursing Facility.

☐ PACE Program.

☐ MI Health Link.

Other service option(s) and local referral(s) that do not require Medicaid Nursing Facility Level of Care:

Signature of applicant

Signature of applicant's representative

Date

SECTION III - APPEAL RIGHTS

I have received a copy of a denial of Medicaid NF Level of Care service based on the LOCD and understand my right to appeal.

Signature of applicant

Signature of applicant's representative

Date

Submit Print FOC Print Summary

- After clicking Submit, an alert will pop-up confirming the LOCD is being submitted and further editing will be disabled.

- Click Ok to continue or click Cancel to return to the LOCD for changes.

Print

Help

Level of Care Determination

Welcome

Basic Information

Doors

Freedom of Choice

Freedom of Choice

Upload Documents

Helpful Links

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This will submit the LOCD and disable further editing. Click OK to proceed.

OK

Cancel

Provider's ID/NPI:

Date of Birth:

LOCD Created-On Date:

Provider's Name:

Applicant's Name:

Representative (if any):

SECTION I-MEDICAL/FUNCTIONAL ELIGIBILITY

Based on an LOCD medical/functional assessment of LTC needs conducted on **11/02/2022** , the applicant indicated above:

☒ Does meet the LOCD medical/functional criteria for Medicaid NF Level of Care by scoring in **Door 4** .

☐ Does Not meet the LOCD medical/functional criteria for Medicaid NF Level of Care (please proceed to Section III)

Signature of healthcare professional completing or adopting LOCD

Healthcare profession title

Date

SECTION II - FREEDOM OF CHOICE

I have been advised that I meet LOCD criteria and I am functionally eligible for any of the LTC programs listed below. I have received information about all LTC programs available in my area. I choose to receive services and supports from:

☐ MI Choice Waiver Program.

☐ Nursing Facility.

☐ PACE Program.

☐ MI Health Link.

Other service option(s) and local referral(s) that do not require Medicaid Nursing Facility Level of Care:

Signature of applicant

Signature of applicant's representative

Date

SECTION III - APPEAL RIGHTS

I have received a copy of a denial of Medicaid NF Level of Care service based on the LOCD and understand my right to appeal.

Signature of applicant

Signature of applicant's representative

Date

Reset

Close

Submit

Print FOC

Print Summary

Entering an LOCD in CHAMPS

- If this is a new record or the first time an individual has had a LOCD completed the record may be selected for verification review.
- If the LOCD is selected, supporting documentation will need to be uploaded within one business day.
 - If the record is not selected, proceed to [slide 46](#)
- Click Ok, acknowledging the LOCD record has been selected for verification review, and proceed to the Upload Documents section.

The screenshot shows the 'Level of Care Determination' form in the CHAMPS system. A pop-up window from 'tp-chp-uat.state.mi.us' is displayed, stating: 'LOCD was submitted successfully and selected for verification review. Please upload the required supporting documents for this LOCD.' with an 'OK' button. The form includes sections for 'SECTION I-MEDICAL/FUNCTIONAL ELIGIBILITY', 'SECTION II - FREEDOM OF CHOICE', and 'SECTION III - APPEAL RIGHTS'. It contains fields for provider and applicant information, checkboxes for eligibility criteria, and signature lines for healthcare professionals and applicants. A 'LOADING...' spinner is visible in the center of the form.

Entering an LOCD in CHAMPS

- Providers will be taken to the Upload Documents section automatically when a record is selected for verification review.
- Click Add
- Click Choose File and locate the necessary documents. Notice the acceptable file types.
- Add a Description of File
- Click Save
 - The file name will show as a hyperlink, and this indicates the file has been attached.
 - Click Add to upload additional documents.
- Click Submit

Print Help

Level of Care Determination

Reset Close

Welcome

Basic Information

Doors

Freedom of Choice

Upload Documents

Upload Documents

Helpful Links

Upload Documents

File Name	Description	Uploaded Date	Actions
-----------	-------------	---------------	---------

Add **Submit**

Print Help

Level of Care Determination

Reset Close

Welcome

Basic Information

Doors

Freedom of Choice

Upload Documents

Upload Documents

Helpful Links

Upload Documents

File Name	Description	Uploaded Date	Actions
-----------	-------------	---------------	---------

Add **Submit**

Click 'Browse' to Upload File

*File Name:

Choose File to file chosen

(Allowable file extensions - .txt, .gif, .jpg, .jpeg, .png, .html, .htm, .pdf, .tif, .tiff, .doc, .docx, .xls, .xlsx)

Save **Cancel**

Description:

Attachment Description

Print Help

Level of Care Determination

Reset Close

Welcome

Basic Information

Doors

Freedom of Choice

Upload Documents

Upload Documents

Helpful Links

Upload Documents

File Name	Description	Uploaded Date	Actions
Test File.docx	Test File	12-09-2022 11:06:51	

Add **Submit**

Entering an LOCD in CHAMPS

- After clicking Submit a pop-up will display confirming that if selecting ok, additional documents will not be able to be uploaded.
- Click ok to proceed.
- After clicking ok, the Add and Submit buttons will be greyed out.
- Click Close, as the record is now in review status.
 - MDHHS or its designee will inform the provider of the results in two business days.
 - After this process is complete the provider must go back into the applicable LOCD record to complete the Freedom of Choice form.

The screenshot shows the 'Level of Care Determination' interface. A sidebar on the left contains a menu with 'Welcome', 'Basic Information', 'Doors', 'Freedom of Choice', 'Upload Documents', and 'Helpful Links'. The 'Upload Documents' option is selected and highlighted in green. The main area is titled 'Upload Documents' and contains a table with columns: File Name, Description, Uploaded Date, and Actions. A single row is visible with 'Test File.docx' as the file name, 'Test File' as the description, and '11-09-2022 05:02:13' as the upload date. Below the table are 'Add' and 'Submit' buttons. A modal pop-up is displayed in the center, titled 'tp-chp-uat.state.mi.us says', with the message 'This will submit the uploaded attachments and prevent further upload. Do you want to continue?'. The pop-up has 'OK' and 'Cancel' buttons. The 'OK' button is highlighted with a red rectangle.

This screenshot shows the 'Upload Documents' screen after the submission. The 'Add' and 'Submit' buttons are now greyed out. A red arrow points from the 'Freedom of Choice' menu item in the sidebar to the 'Add' button. In the top right corner, the 'Close' button (labeled 'XClose') is highlighted with a red rectangle. The table still shows the 'Test File.docx' entry.

The screenshot displays the 'LOCD List' table. At the top, there are filter options and a 'Go' button. The table has columns for various fields including Application ID, Member ID, First Name, Last Name, Provider ID/NPI, Provider Name, Door, Conducted Date, Created Date, Start Date, End Date, Created By, Modified Date, Program Type, LOCD Method, Review Type, Application Status, Verification Status, and Operational Status. The 'Verification Status' column is highlighted with a red rectangle, and the value 'In Review' is visible in the first data row. The 'Operational Status' for the same row is 'Active'. At the bottom, there are pagination controls showing 'View Page: 1' and 'Viewing Page: 1'.

Entering an LOCD in CHAMPS

- Click Print FOC to print the Freedom of Choice form and obtain all required signatures.
- After a LOCD is submitted:
 - The record is assigned an Application ID (Top right of screen).
 - The LOCD summary can be printed.

Print Help

Level of Care Determination

Reset Close

Application ID: [Redacted]

Freedom Of Choice

Provider's Name: [Redacted]
Applicant's Name: [Redacted]
Representative (if any): [Redacted]

Provider's ID/NPI: [Redacted]
Date of Birth: [Redacted]
LOCD Created-On Date: [Redacted]

SECTION I-MEDICAL/FUNCTIONAL ELIGIBILITY
Based on an LOCD medical/functional assessment of LTC needs conducted on **11/02/2022**, the applicant indicated above:
☒ **Does** meet the LOCD medical/functional criteria for Medicaid NF Level of Care by scoring in **Door 4**.
☐ **Does Not** meet the LOCD medical/functional criteria for Medicaid NF Level of Care (please proceed to Section III)

Signature of healthcare professional completing or adopting LOCD Healthcare profession title Date

SECTION II - FREEDOM OF CHOICE
I have been advised that I meet LOCD criteria and I am functionally eligible for any of the LTC programs listed below. I have received information about all LTC programs available in my area. I choose to receive services and supports from:
☐ MI Choice Waiver Program.
☐ Nursing Facility.
☐ PACE Program.
☐ MI Health Link.
Other service option(s) and local referral(s) that do not require Medicaid Nursing Facility Level of Care:
[Redacted]

Signature of applicant Signature of applicant's representative Date

SECTION III - APPEAL RIGHTS
I have received a copy of a denial of Medicaid NF Level of Care service based on the LOCD and understand my right to appeal.

Signature of applicant Signature of applicant's representative Date

Print FOC Print Summary

Entering an LOCD in CHAMPS

- The print screen of the Freedom of Choice Form will pop-up and display in a PDF format. Print and sign the form.
- Reminder: The signed form must be kept in the individual's file for a minimum of three years.

Set Microsoft Edge as the default application for reading PDF files? [Set as default](#)

1 of 1

Application ID: _____

MICHIGAN MEDICAID NURSING FACILITY LEVEL OF CARE DETERMINATION (LOCD)

Provider's Name : _____
Provider's ID/NPI: _____
Applicant's Name: _____
Date of Birth : _____ Created-on Date: 11/09/2022
Representative(if any): _____

SECTION I-MEDICAL/FUNCTIONAL ELIGIBILITY

Based on an LOCD medical/functional assessment of LTC needs conducted on 11/02/2022, the applicant indicated above: (date)

☒ **Does** meet the LOCD medical/functional criteria for Medicaid NF Level of Care by scoring in Door 4.

☐ **Does Not** meet the LOCD medical/functional criteria for Medicaid NF Level of Care (please proceed to Section III)

Signature of healthcare professional completing or adopting LOCD Healthcare profession title Date

SECTION II-FREEDOM OF CHOICE

I have been advised that I meet LOCD criteria and I am functionally eligible for any of the LTC programs listed below. I have received information about all LTC programs available in my area. I choose to receive services and supports from:

☐ MI Choice Waiver Program.
☐ Nursing Facility.
☐ PACE program.
☐ MI Health Link.

Other service option(s) and local referral(s) that do not require Medicaid Nursing Facility Level of Care: _____

Signature of applicant Signature of applicant's representative Date

SECTION III-APPEAL RIGHTS

I have received a copy of a denial of Medicaid NF Level of Care service based on the LOCD and understand my right to appeal.

Signature of applicant Signature of applicant's representative Date

Entering an LOCD in CHAMPS

- After selecting Print Summary from the FOC screen the entire LOCD will pop-up and display in a PDF format.
- Providers may print this or save in PDF format.
- To get back to the FOC screen within CHAMPS select minimize or close.

Work - Microsoft Edge

Application ID: [REDACTED]

MICHIGAN MEDICAID NURSING FACILITY LEVEL OF CARE DETERMINATION (LOCD)

APPLICATION INFORMATION

CHAMPS Provider ID: [REDACTED]

Beneficiary Information

Medicaid ID: [REDACTED]

First Name: [REDACTED] Date Of Birth: [REDACTED]

Middle Initial: [REDACTED] SSN (Last 4 Digits): [REDACTED]

Last Name: [REDACTED]

Representative (if applicable): [REDACTED]

LOCD Information

Provider Conducting LOCD: [REDACTED]

Phone (Licensed Professional): [REDACTED]

Name (Licensed Professional who Conducted Assessment): [REDACTED]

License Type (Licensed Professional who Conducted Assessment): [REDACTED]

LOCD Method: Face To Face Review Created Date: [REDACTED]

Type of Provider Conducting LOCD: NURSING FACILITY Conducted Date: [REDACTED]

LOCD Entered in CHAMPS by: [REDACTED]

DOOR INFORMATION

Door 1 - Activities of Daily Living

Bed Mobility: How the applicant moves to and from lying position, turns side to side, and positions body while in bed(sleeping surface).

☐ **Independent**
No help or oversight, OR help or oversight provided only 1 or 2 times during last 7 days.

☐ **Supervision**
Oversight, encouragement or cueing provided 3 or more times during last 7 days, OR supervision 3 or more times plus physical assistance provided only 1 or 2 times during last 7 days.

☐ **Limited Assistance**
Applicant highly involved in activity, received physical help in guided maneuvering of limbs or other non-weight-bearing assistance 3 or more times, OR more help provided only 1 or 2 times during last 7 days.

☐ **Extensive Assistance**
While the applicant performed part of activity over last 7-day period, help of following type(s) provided 3 or more times:
- Weight-bearing Support
- Full performance by another during part, but not all, of last 7 days

☐ **Total Dependence**
Full performance of activity by another during entire 7 days.

☒ **Activity did not occur**
Activity did not occur during entire 7 days (regardless of ability).

Transfers: How the applicant moves between surfaces, to/from bed (sleeping surface), chair, wheelchair, standing position (exclude to/from bath/toilet).

☐ **Independent**
No help or oversight, OR help or oversight provided only 1 or 2 times during last 7 days.

☐ **Supervision**
Oversight, encouragement or cueing provided 3 or more times during last 7 days, OR supervision 3 or more times plus physical assistance provided only 1 or 2 times during last 7 days.

1

Entering an LOCD in CHAMPS

- To close out of the LOCD record click Close.

Print Help

Level of Care Determination

Rese Close

Welcome Basic Information Doors Freedom of Choice Freedom of Choice Upload Documents Helpful Links

MDHHS
Michigan Department of Health & Human Services

FREEDOM OF CHOICE

Application ID: [REDACTED]

Provider's Name: [REDACTED]

Applicant's Name: [REDACTED]

Representative (if any): [REDACTED]

Provider's ID/NPI: [REDACTED]

Date of Birth: [REDACTED]

LOCD Created-On Date: [REDACTED]

SECTION I-MEDICAL/FUNCTIONAL ELIGIBILITY

Based on an LOCD medical/functional assessment of LTC needs conducted on **11/02/2022**, the applicant indicated above:

☒ Does meet the LOCD medical/functional criteria for Medicaid NF Level of Care by scoring in **Door 4**.

☐ Does Not meet the LOCD medical/functional criteria for Medicaid NF Level of Care (please proceed to Section III)

Signature of healthcare professional completing or adopting LOCD Healthcare profession title Date

SECTION II - FREEDOM OF CHOICE

I have been advised that I meet LOCD criteria and I am functionally eligible for any of the LTC programs listed below. I have received information about all LTC programs available in my area. I choose to receive services and supports from:

☐ MI Choice Waiver Program.

☐ Nursing Facility.

☐ PACE Program.

☐ MI Health Link.

Other service option(s) and local referral(s) that do not require Medicaid Nursing Facility Level of Care:

[REDACTED]

Signature of applicant Signature of applicant's representative Date

SECTION III - APPEAL RIGHTS

I have received a copy of a denial of Medicaid NF Level of Care service based on the LOCD and understand my right to appeal.

Signature of applicant Signature of applicant's representative Date

Print FOC Print Summary

Entering an LOCD in CHAMPS

- After closing out of the LOCD record, the LOCD list page will display the most recently entered LOCD.

My Inbox

Provider

Member

Last Login: 07 DEC, 2022 10:15 AM

Note Pad

External Links

My Favorites

Print

Help

Provider Portal

LOCD List

Close

Create

To Search member's LOCD records, complete one of the following criteria:

- Application ID of the LOCD record, OR
- Member ID of the beneficiary, OR
- SSN of the beneficiary, OR
- First Name, Last Name, and Last 4 digits of the SSN, OR
- First Name, Last Name, and DOB, OR
- First Name, DOB, and the Last 4 digits of the SSN, OR
- Last Name, DOB, and the Last 4 digits of the SSN, OR
- DOB and the Last 4 digits of the SSN

The System will not display any records if the filter by combinations match to more than one member.

LOCD List

Filter By

Filter By

Filter By

And

Active

Go

Save Filters

My Filters

Actions	Application ID	Member ID	First Name	Last Name	Provider ID/NPI	Provider Name	Door	Conducted Date	Created Date	Start Date	End Date	Created By	Modified Date	Program Type	LOCD Method	Review Type	Application Status	Verification Status	Operational Status
Action							1	12/05/2022	12/09/2022	12/05/2022	12/05/2023		12/09/2022	Nursing Facility	Face To Face Review	LOCD	Completed	Not Selected	Active

View Page: 1

Go

Page Count

Save to Excel

Viewing Page: 1

First

Prev

Next

Last

LOCD Search in CHAMPS

There may be times when a provider needs to look up a LOCD within CHAMPS or verify:

- The qualifying door;
- Verification review selection;
- Door end-dates/expiration dates; and
- If there is an active eligible LOCD on file.

LOCD Search in CHAMPS

- Providers can search for LOCDs by utilizing the search criteria at the top of the screen.
- CHAMPS will not display any records if the filter by combination(s) matches more than one member.
- Providers who wish to export their list of LOCDs for all currently enrolled/admitted members can utilize the [Export LOCD List page](#) for step-by-step instructions.
- Select the Filter By option
- Select Go

CHAMPS < My Inbox > Provider > Member >

Provider Portal > LOCD List

Close Create

To Search member's LOCD records, complete one of the following criteria:

- Application ID of the LOCD record, OR
- Member ID of the beneficiary, OR
- SSN of the beneficiary, OR
- First Name, Last Name, and Last 4 digits of the SSN, OR
- First Name, Last Name, and DOB, OR
- First Name, DOB, and the Last 4 digits of the SSN, OR
- Last Name, DOB, and the Last 4 digits of the SSN, OR
- DOB and the Last 4 digits of the SSN

The System will not display any records if the filter by combinations match to more than one member.

LOCD List

Member ID Filter By Filter By And Active Go Save Filters My Filters

Application ID	Member ID	First Name	Last Name	Provider ID/NPI	Provider Name	Conducted Date	Created Date	Start Date	End Date	Created By	Modified Date	Program Type	LOCD Method	Review Type	Application Status	Verification Status	Operational Status
						11/02/2022	11/09/2022	11/02/2022	12/04/2022		12/09/2022	Nursing Facility	Desk Review	Verification	Completed	Documents Not Available	Active
						12/05/2022	12/09/2022	12/05/2022	12/05/2023		12/09/2022	Nursing Facility	Face To Face Review	LOCD	Completed	In Review	Active
						10/30/2022	11/03/2022	10/30/2022	11/01/2022		11/09/2022	Nursing Facility	Face To Face Review	LOCD	Completed	Selected	Active

View Page: 1 Go Page Count Save to Excel Viewing Page: 1 << First < Prev > Next >> Last

LOCD Search in CHAMPS

- The search results will display.
- From here select the applicable Action from the dropdown.
 - Manage
 - Renew
 - Upload Documents
 - View LOCD
- Note: If documents were already uploaded to the selected record, the Upload Documents option will not work.
- To return to the full LOCD List page clear the Filter By options and click Go.

The screenshot shows the CHAMPS web application interface. At the top, there's a navigation bar with 'My Inbox', 'Provider', and 'Member' tabs. Below this is a header with 'Last Login: 09 NOV, 2022 02:17 PM' and links for 'Note Pad', 'External Links', 'My Favorites', 'Print', and 'Help'. The main content area is titled 'LOCD List' and includes a search section with instructions: 'To Search member's LOCD records, complete one of the following criteria: - Application ID of the LOCD record, OR - Member ID of the beneficiary, OR - SSN of the beneficiary, OR - First Name, Last Name, and Last 4 digits of the SSN, OR - First Name, Last Name, and DOB, OR - First Name, DOB, and the Last 4 digits of the SSN, OR - Last Name, DOB, and the Last 4 digits of the SSN, OR - DOB and the Last 4 digits of the SSN. The System will not display any records if the filter by combinations match to more than one member.'

Below the search section is a table titled 'LOCD List'. The table has columns for Application ID, Member ID, First Name, Last Name, Provider ID/NPI, Provider Name, Door, Conducted Date, Created Date, Start Date, End Date, Created By, Modified Date, Program Type, LOCD Method, Review Type, Application Status, Verification Status, and Operational Status. A red box highlights the 'Actions' dropdown menu for the first row, which lists 'Action', 'Manage', 'Renew', 'Upload Documents', and 'View LOCD'. The table also includes pagination controls at the bottom right, showing 'Viewing Page: 1' and buttons for 'First', 'Prev', 'Next', and 'Last'.

Passive Redetermination of Functional Eligibility in CHAMPS

How to tell if a beneficiary was passively redetermined.

Passive Redetermination of Functional Eligibility in CHAMPS

- Providers will receive a notification on their My Inbox Landing page under My Reminders that signifies when a Passive Redetermination was completed for a beneficiary.
- Reminder: Passive redetermination is not guaranteed, it does not replace the responsibility of the facility and/or program in monitoring their LOCD data to ensure it's up to date and accurately representing the individual's medical functional condition.

My Reminders					
Filter By				Go	
		Save Filters		My Filters	
Alert Type	Alert Message	Alert Date	Due Date	Read	
▲▼	▲▼	▲▼	▲▼	▲▼	
LOCD Ending	The LOCD record for member ID [REDACTED] is ending in 45 days. Please conduct another LOCD for the member.	02/19/2020	03/20/2020	N	
LOCD Ending	The LOCD record for member ID [REDACTED] ending in 30 days. Please conduct another LOCD for the member.	02/19/2020	03/20/2020	N	
Passive Redetermination Completed	Passive Redetermination has established LOCD eligibility for Member [REDACTED] See Member's LOCD List Page for more information.	03/04/2020	04/03/2020	N	
LOCD Ending	The LOCD record for member ID [REDACTED] is ending in 30 days. Please conduct another LOCD for the member.	03/05/2020	04/04/2020	N	
LOCD Ending	The LOCD record for member ID [REDACTED] is ending in 15 days. Please conduct another LOCD for the member.	03/05/2020	04/04/2020	N	
LOCD Ending	The LOCD record for member ID [REDACTED] is ending in 30 days. Please conduct another LOCD for the member.	03/05/2020	04/04/2020	N	
LOCD Ending	The LOCD record for member ID [REDACTED] is ending in 15 days. Please conduct another LOCD for the member.	03/05/2020	04/04/2020	N	
LOCD Ending	The LOCD record for member ID [REDACTED] is ending in 15 days. Please conduct another LOCD for the member.	03/09/2020	04/08/2020	N	
LOCD Ending	The LOCD record for member ID [REDACTED] ending in 15 days. Please conduct another LOCD for the member.	03/09/2020	04/08/2020	N	

Passive Redetermination of Functional Eligibility in CHAMPS

- When looking at the LOCD List page from the Member Tab within CHAMPS providers can tell which records have been passively enrolled by looking at the Created By or LOCD Method column.
- Providers may also utilize the Filter By option to bring back all the records for a beneficiary to review the previous record.

CHAMPS My Inbox Provider Member

Last Login: 07 DEC, 2022 10:15 AM

Provider Portal > LOCD List

Close Create

To Search member's LOCD records, complete one of the following criteria:

- Application ID of the LOCD record, OR
- Member ID of the beneficiary, OR
- SSN of the beneficiary, OR
- First Name, Last Name, and Last 4 digits of the SSN, OR
- First Name, Last Name, and DOB, OR
- First Name, DOB, and the Last 4 digits of the SSN, OR
- Last Name, DOB, and the Last 4 digits of the SSN, OR
- DOB and the Last 4 digits of the SSN

The System will not display any records if the filter by combinations match to more than one member.

LOCD List

Member ID Filter By Filter By And Active Go Save Filters My Filters

Actions	Application ID	Member ID	First Name	Last Name	Provider ID/NPI	Provider Name	Door	Conducted Date	Created Date	Start Date	End Date	Created By	Modified Date	Program Type	LOCD Method	Review Type	Application Status	Verification Status	Operational Status
Action							1	04/13/2022	04/13/2022	04/13/2022	09/22/2022	Passive_Redetermination	9/23/2022	Nursing Facility	Passive Redetermination	LOCD	Completed	Not Selected	Active
Action							1	09/23/2022	09/23/2022	09/23/2022	09/23/2022		9/23/2022	Nursing Facility	Face To Face Review	LOCD	Completed	Not Selected	Active
Action							1	01/12/2022	01/12/2022	01/12/2022	04/12/2022	Passive_Redetermination	4/28/2022	Nursing Facility	Passive Redetermination	LOCD	Completed	Not Selected	Active
Action							1	10/27/2021	10/29/2021	10/27/2021	01/11/2022		1/21/2022	Nursing Facility	Face To Face Review	LOCD	Completed	Not Selected	Active
Action							1	10/12/2021	10/12/2021	10/12/2021	10/26/2021	Passive_Redetermination	0/29/2021	Nursing Facility	Passive Redetermination	LOCD	Completed	Not Selected	Active
Action							1	09/10/2021	09/16/2021	09/10/2021	10/11/2021		0/27/2021	Nursing Facility	Face To Face Review	LOCD	Completed	Not Selected	Active
Action							1	07/13/2021	07/13/2021	07/13/2021	09/09/2021	Passive_Redetermination	9/16/2021	Nursing Facility	Passive Redetermination	LOCD	Completed	Not Selected	Active
Action							1	04/13/2021	04/13/2021	04/13/2021	07/12/2021	Passive_Redetermination	7/23/2021	Nursing Facility	Passive Redetermination	LOCD	Completed	Not Selected	Active

Passive Redetermination of Functional Eligibility in CHAMPS

- As a reminder a passive redetermination cannot find a beneficiary ineligible. This record displays the beneficiary was originally approved through door 2; however, the passive redetermination assigned a door 87 signifying that a face-to-face assessment is needed as the passive process was not able to determine functional eligibility based on data received.
 - The end date for the door 87 LOCD record will be 45 days from the system date or the current LOCD end date; whichever is sooner.

Close

Create

LOCD List

Filter By

Filter By

And

Active

Go

Save Filters

My Filters

Actions	Application ID	Member ID	First Name	Last Name	Provider ID/NPI	Provider Name	Door	Conducted Date	Created Date	Start Date	End Date	Created By	Modified Date	Program Type	LOCD Method	Review Type	Application Status
<div><div></div><div></div></div>	<div><div></div><div></div></div>	<div><div></div><div></div></div>	<div><div></div><div></div></div>	<div><div></div><div></div></div>	<div><div></div><div></div></div>	<div><div></div><div></div></div>	87	03/17/2020	03/17/2020	03/17/2020	05/01/2020	Passive,Redetermination	03/17/2020	Nursing Facility	Passive Redetermination	LOCD	Completed
<div><div></div><div></div></div>	<div><div></div><div></div></div>	<div><div></div><div></div></div>	<div><div></div><div></div></div>	<div><div></div><div></div></div>	<div><div></div><div></div></div>	<div><div></div><div></div></div>	2	08/06/2019	08/06/2019	08/06/2019	03/16/2020		03/17/2020	Nursing Facility	Face To Face Review	LOCD	Completed
<div><div></div><div></div></div>	<div><div></div><div></div></div>	<div><div></div><div></div></div>	<div><div></div><div></div></div>	<div><div></div><div></div></div>	<div><div></div><div></div></div>	<div><div></div><div></div></div>	1	04/29/2019	04/29/2019	04/29/2019	08/05/2019		08/06/2019	Nursing Facility	Face To Face Review	LOCD	Completed

Summary

- Individuals seeking services in a nursing facility or program through Medicaid-Funded LTSS need to meet Medicaid financial, program and LOCD Criteria for Functional eligibility to be eligible.
- A face-to-face assessment is to be completed and entered into CHAMPS.
 - Face-to-face assessments must be within 14 days of when the LOCD assessment is entered into CHAMPS.
- Providers may adopt an active LOCD record from another provider as their own. Reminder, LOCD records follow the individual.
- There may be times when a LOCD record is randomly selected for **Verification Review**. The purpose is to determine LOCD accuracy. Providers will be required to upload supporting documentation within one business day.
- The **Freedom of Choice** Form is to be gone over and signed by the individual or their representative once eligibility is determined through a door.
- After a LOCD record is complete a **Passive Redetermination** of Functional Eligibility will occur. Based on door eligibility or data received a new LOCD record will be created. Note, some doors are bypassed for this process.

Provider Resources



MDHHS

website: www.michigan.gov/medicaidproviders



**We continue to update our
Provider Resources:**

[CHAMPS Resources](#)

[Listserv Instructions](#)

[Provider Alerts](#)

[Medicaid Provider Training Sessions](#)



Provider Support:

ProviderSupport@Michigan.gov

1-800-292-2550



**Thank you for participating in the Michigan Medicaid
Program**